Improving Health Together:
A Policy Framework for Chronic Disease Prevention and Management in Newfoundland and Labrador

Chronic Disease Research Exchange Group
January 2013
Outline

• Overview of chronic diseases
• The need for a chronic disease framework
• The chronic disease policy framework
  – Policy statements (with initiatives)
• Outcomes
Chronic Disease

• Chronic diseases:
  – generally slow to develop and have long duration
  – share common risk factors
  – examples include: arthritis, diabetes, heart disease
• High incidence of chronic disease: 61%
• High rates of modifiable risk factors:
  – Smoking: 20% (ages 15+)
  – Physical inactivity: 53% (ages 12+)
  – Inadequate fruit/vegetable consumption: 73% (ages 12+)
• High rates of intermediate risk conditions:
  – High blood pressure: 23% (ages 12+)
  – Overweight/Obese: 65% of adults and 30% of children
The Need for a Chronic Disease Plan

- Chronic disease is the subject of much public discussion
- The Auditor General Report (2010) recommended a provincial plan for chronic disease
- National reports (eg. diabetes, stroke, chronic pain) call for provincial action
- PC Blue Book had a commitment for a chronic disease strategy
Policy Framework

Improving Health Together
– released December 2011

Vision
• Newfoundland and Labrador will be a place where individuals at risk for or living with a chronic disease, can achieve optimal health and well-being with the support of the community and the health care system.
Policy Framework

- Chronic Diseases being addressed:
  - Arthritis
  - Cancer*
  - Chronic pain
  - Diabetes
  - Heart disease
  - Kidney disease*
  - Lung disease
  - Stroke
Expanded Chronic Care Model

**Community**
- (Build) Healthy Public Policy
- (Create) Supportive Environments
- (Strengthen) Community Action

**Health System (Health Care Organizations)**
- Self Management / Develop Personal Skills
- Delivery System Design / Reorient Health Services
- (Provider) Decision Support
- Information Systems

**Activated Community**
- Informed Activated Patient

**Productive Interactions & Relationships**
- Prepared Proactive Practice Team
- Prepared Proactive Community Partners

**Population Health Outcomes / Functional and Clinical Outcomes**

**Newfoundland Labrador**

*Improving Health Together: A Policy Framework for Chronic Disease Prevention and Management in Newfoundland and Labrador*
Policy Statement 1: Self-Management

Being the manager of your own health

Actions:

- Improving Health: My Way – provincial chronic disease self-management program
- Models of practice for health care providers to support self-management
- Online/Telehealth to support self-management
- HealthLine
Policy Statement 2: Prevention and Awareness

Promoting health and preventing diseases

Examples of initiatives:
  – Awareness campaigns (i.e. Signs of stroke)
  – Screening programs; assessment tools and initiatives
  – Stroke prevention clinics; early identification of kidney disease eGFR program
Policy Statement 3: Health Care Delivery

Organizing and coordinating services

Actions:

– Provincial/Regional coordination of programs and services
– Designation of stroke centres
– Telehealth – Telediabetes/Telestroke
– Chronic Pain Mentorship Program
– Team-based care
Policy Statement 4: Practice Guidelines

Using current information and standards

Examples of initiatives:
- Provincial practice guidelines
- Electronic protocols and flow sheets
- Professional development education and training
Policy Statement 5: Information Systems and Research

Collecting and using data to guide services

Actions:

– Diabetes database
– Chronic disease surveillance system
– National Stroke Audit
– Research initiatives
Policy Statement 6: Community Action

Working together for better health

Actions:

– Community funding grant programs
– Support for community agencies
– Engaging community groups in the chronic disease initiatives
– Support groups for clients
Outcomes

• Earlier detection and reduced progression of chronic disease
• Improved health and functioning of those living with chronic disease
• Improved use of health system resources:
  – less visits to emergency
  – fewer hospitalizations
  – greater coordination of community and health system services
For more information

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